



Your business
is our business.

REDACTED – FOR PUBLIC INSPECTION

7852 Walker Drive, Suite 200
Greenbelt, Maryland 20770
phone: 301-459-7590, fax: 301-577-5575
internet: www.jsitel.com, e-mail: jsi@jsitel.com

June 30, 2015

Via Hand Delivery

Marlene H. Dortch, Secretary
Federal Communications Commission
Office of the Secretary
445 12th Street, SW
Washington, DC 20554

**Re: WC Docket No. 14-58
2015 ETC Annual Report of Ben Lomand Rural Telephone Cooperative, Inc.
Study Area Code 290553**

Dear Ms. Dortch:

On behalf of Ben Lomand Rural Telephone Cooperative, Inc. (“Ben Lomand Rural”), JSI files the attached confidential and redacted versions of the FCC Form 481 ETC annual reporting information pursuant to sections 54.313 and 54.422 of the Commission’s rules.¹ Ben Lomand Rural seeks confidential treatment under Protective Order for section 54.313(f)(2) financial information.² The redacted version is also being filed this date via the FCC’s Electronic Comment Filing System. In addition, attached is a letter requesting confidential treatment under Sections 0.457 and 0.459 of its Progress Report on its Five-Year Service Quality Improvement Plan as required by Section 54.313(a)(1).³

Please direct any questions regarding the filing to the undersigned.

Sincerely,

John Kuykendall
JSI Vice President
301-459-7590
jkuykendall@jsitel.com

cc: Charles Tyler, Telecommunications Access Policy Division (two copies, confidential)

¹ 47 C.F.R. §§ 54.313, 54.422.

² *Connect America Fund et al.*, WC Docket No. 10-90 *et al.*, Protective Order, DA 15-712 rel. June 17, 2015 (Protective Order). 47 C.F.R. § 54.313(f)(2).

³ 47 C.F.R. §§ 0.457, 0.459, 54.313(a)(1).



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June 30, 2015

Marlene H. Dortch, Secretary
Federal Communications Commission
Office of the Secretary
445 12th Street, SW
Washington, DC 20554

**Re: WC Docket No. 14-58
2015 ETC Annual Report of Ben Lomand Rural Telephone Cooperative, Inc.
Study Area Code 290553
Request for Confidentiality**

Dear Ms. Dortch:

John Staurulakis, Inc. (“JSI”), on behalf of its client Ben Lomand Rural Telephone Cooperative, Inc. (the “Company”) hereby requests, pursuant to Sections 0.457 and 0.459 of the Commission’s rules,¹ withholding from public inspection certain information contained in an attachment to the above referenced reporting requirement. The Company provides the following in support of its request, numbered consistent with the subparagraphs of Section 0.459(b).²

1. The information for which the Company is seeking confidential treatment is an attachment to the Company’s annual reporting information pursuant to Sections 54.313 and 54.422 of the Commission’s rules (“Report”).³
2. Rate-of-Return Eligible Telecommunications Carriers (“ETCs”) must file with the Commission an initial section 54.202(a) Five-Year Service Quality Improvement Plan (“Five-Year Plan”) which is contained in the attachment to the 2015 Report.⁴
3. The information contained in attachment for which the Company seeks the withholding from public inspection is the entirety of data pertaining to the Company’s Five-Year Plan provided at FCC Form 481 Line 112 attachment. Information of this nature is confidential commercial information routinely withheld from public inspection.

¹ 47 C.F.R. §§ 0.457, 0.459.

² 47 C.F.R. § 0.459(b)(1) through (9).

³ 47 C.F.R. §§ 54.313, 54.422.

⁴ See *In the Matter of Connect America Fund*, WC Docket No. 10-90, Order DA 14-591 (rel. May 1, 2014).

4. With respect to identifying the degree to which the subject attachment concerns a service that is subject to competition, the information is of a financial and competitive nature regarding the provision of telecommunications services. The Line 112 attachment contains competitively sensitive information related to proposed improvements or upgrades and maintenance the Company's network.

In its *March 5, 2013 Order*, the FCC. The FCC specified that for rate-of-return carriers, the five-year plans "should describe the carrier's network improvement plan, which should provide greater visibility into current plans to extend broadband service to unserved locations in rate-of-return service territories."⁵ Accordingly, because the Company is a rate-of-return carrier, it must file a five-year service improvement plan which contains proprietary, competitively sensitive information related to the Company's existing network including the specific locations of customers as well as describe proposed improvements or upgrades and maintenance of its network throughout its service area. Specifically, this information sets forth services provided by the Company over its existing network including specific locations of customers as well as planned network improvement and maintenance for the years 2015 through 2019 including project start and completion dates, population that will be impacted by the improvements and upgrades at the wire center level and projected capital costs associated with the improvements and upgrades and operating costs associated with maintaining the network including depreciation for investments that have already been made. As such, this information contains competitively sensitive information related to the Company's existing network as well as detailed plans at the wire center level for network upgrades and maintenance projected for the years 2015 through 2019.

5. With respect to identifying possible exposure to competitive harm, the information contained in the Line 112 attachment is information that is not customarily released to the public. This information is proprietary to the Company, is unique to the Company's serving territory and is only known to the Company and its authorized agents. If the Information is not protected, it would have economic value to potential competitors who would be able to target their marketing to specific customers. In a competitive telecommunications marketplace, this type of information is highly sensitive. If publicly disclosed, it would enable competitors to craft business plans that capitalize on their knowledge of the locations of the Company's customers which would place the Company at a competitive disadvantage.
6. With respect to steps the Company has taken to ensure against unauthorized disclosure of the information contained in the attachment, the Company is filing the attachment under seal. The Company uses the information contained in the Five-Year Plan to ensure that its customers continue to receive state-of-the-art high quality telecommunications and broadband services that the Company has

⁵ See *Connect America Fund et al.*, WC Docket 10-90 *et al.*, Order, DA 13-332 (rel. Mar. 5, 2013) ("*March 5, 2013 Order*") at para 9 citing Section 54.202(a) (1) (ii).

been providing to them for many years as well as to satisfy mandatory reporting requirements and does not share the information for which protection is sought. The Company protects the secrecy of this information with a security protocol that ensures the information is not inadvertently disclosed or disseminated. Only directors, managers and employees with a direct need to know are authorized to access the information.

7. Any previous versions of this information are not publicly available.
8. Because the information is not routinely available, a need exists for maintaining the confidentiality of this information permanently.
9. Not applicable.

Based on the preceding, JSI respectfully requests on behalf of the Company that the Commission grant confidential treatment under Section 0.459 to Company's Five-Year Plan provided at FCC Form 481 Line 112 attachment.

Please contact the undersigned with any questions regarding this request.

Sincerely,

A handwritten signature in black ink, appearing to read "John Kuykendall". The signature is fluid and cursive, with the first name "John" and last name "Kuykendall" clearly distinguishable.

John Kuykendall
JSI Vice President
301-459-7590
jkuykendall@jsitel.com

**FCC Form 481 - Carrier Annual Reporting
Data Collection Form**

REDACTED FOR PUBLIC INSPECTION

 FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010> Study Area Code	290553
<015> Study Area Name	BEN LOMAND RURAL
<020> Program Year	2016
<030> Contact Name: Person USAC should contact with questions about this data	Lisa Cope
<035> Contact Telephone Number: Number of the person identified in data line <030>	9316684131 ext.2001
<039> Contact Email Address: Email of the person identified in data line <030>	lk@blomand.net

ANNUAL REPORTING FOR ALL CARRIERS		54.313 Completion Required	54.422 Completion Required
		(check box when complete)	
<100> Service Quality Improvement Reporting	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<200> Outage Reporting (voice)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<210> <input checked="" type="checkbox"/> <-- check box if no outages to report		<input checked="" type="checkbox"/>	<input type="checkbox"/>
<300> Unfulfilled Service Requests (voice)	0	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<310> Detail on Attempts (voice)	<div></div> (attach descriptive document)	<input type="checkbox"/>	<input type="checkbox"/>
<320> Unfulfilled Service Requests (broadband)	0	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<330> Detail on Attempts (broadband)	<div></div> (attach descriptive document)	<input type="checkbox"/>	<input type="checkbox"/>
<400> Number of Complaints per 1,000 customers (voice)			
<410> Fixed	0.0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<420> Mobile	0.0	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<430> Number of Complaints per 1,000 customers (broadband)		<input checked="" type="checkbox"/>	<input type="checkbox"/>
<440> Fixed	0.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<450> Mobile	0.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<500> Service Quality Standards & Consumer Protection Rules Compliance	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<510> <div>290553TN510.pdf</div> (attached descriptive document)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<600> Functionality in Emergency Situations	(check to indicate certification)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<610> <div>290553TN610.pdf</div> (attached descriptive document)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<700> Company Price Offerings (voice)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<710> Company Price Offerings (broadband)	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<800> Operating Companies and Affiliates	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<900> Tribal Land Offerings (Y/N)? <input type="radio"/> <input checked="" type="radio"/>	(if yes, complete attached worksheet)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<1000> Voice Services Rate Comparability Certification	Yes <input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<1010> <div>290553TN1010.pdf</div> (attach descriptive document)		<input checked="" type="checkbox"/>	<input type="checkbox"/>
<1100> Certify whether terrestrial backhaul options exist (Yes or No) <input checked="" type="radio"/> <input type="radio"/>	(if not, check to indicate certification)	<input type="checkbox"/>	<input type="checkbox"/>
<1110>	(complete attached worksheet)	<input type="checkbox"/>	<input type="checkbox"/>
<1200> Terms and Condition for Lifeline Customers	(complete attached worksheet)	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Price Cap Carriers, Proceed to Price Cap Additional Documentation Worksheet

Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

<2000>	(check to indicate certification)	<input type="checkbox"/>	<input type="checkbox"/>
<2005>	(complete attached worksheet)	<input type="checkbox"/>	<input type="checkbox"/>

Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet

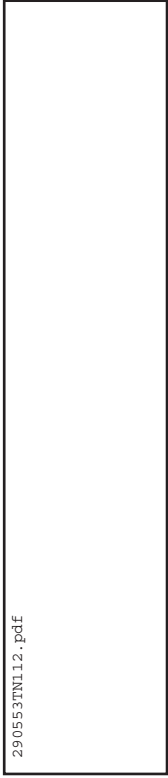
<3000>	(check to indicate certification)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<3005>	(complete attached worksheet)	<input checked="" type="checkbox"/>	<input type="checkbox"/>

(100) Service Quality Improvement Reporting Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	290553
<015>	Study Area Name	BEN LOWAND RURAL
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Lisa Cope
<035>	Contact Telephone Number - Number of person identified in data line <030>	9316684131 ext.2001
<039>	Contact Email Address - Email Address of person identified in data line <030>	lkc@blowand.net
<110>	Has your company received its ETC certification from the FCC? If your answer to Line <110> is yes, do you have an existing "5 year plan" filed with the FCC?	<div> <input type="radio"/> (yes / no) </div> <div> <input checked="" type="radio"/> (yes / no) </div>
<111>		<div> <input type="radio"/> (yes / no) </div> <div> <input type="radio"/> (yes / no) </div>

If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.

<112> Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.



Name of Attached Document

Please select the appropriate responses below (Yes, No, Not Applicable) to confirm that the attached document(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to §54.202(a). The information shall be submitted at the wire center level or census block as appropriate.

<113>	Maps detailing progress towards meeting plan targets	Yes
<114>	Report how much universal service (USF) support was received	Yes
<115>	How much (USF) was used to improve service quality and how support was used to improve service quality	Yes
<116>	How much (USF) was used to improve service coverage and how support was used to improve service coverage	Yes
<117>	How much (USF) was used to improve service capacity and how support was used to improve service capacity	Yes
<118>	Provide an explanation of network improvement targets not met in the prior calendar year.	Not Applicable

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	290553
<015>	Study Area Name	BEN LOMAND RURAL
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Lisa Cope
<035>	Contact Telephone Number - Number of person identified in data line <030>	9316684131 ext. 2001
<039>	Contact Email Address - Email Address of person identified in data line <030>	lk@blomand.net

[illegible]

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

[illegible]

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

Ben Lomand Rural Telephone Cooperative, Inc.

-- See attached worksheet --

(900) Tribal Lands Reporting
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	290553
<015>	Study Area Name	BEN LOMAND RURAL
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Lisa Cope
<035>	Contact Telephone Number - Number of person identified in data line <030>	9316684131 ext.2001
<039>	Contact Email Address - Email Address of person identified in data line <030>	lkc@blomand.net

<910> Tribal Land(s) on which ETC Serves

<920> Tribal Government Engagement Obligation

Name of Attached Document

If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

- <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions.
- <922> Feasibility and sustainability planning;
- <923> Marketing services in a culturally sensitive manner;
- <924> Compliance with Rights of way processes
- <925> Compliance with Land Use permitting requirements
- <926> Compliance with Facilities Siting rules
- <927> Compliance with Environmental Review processes
- <928> Compliance with Cultural Preservation review processes
- <929> Compliance with Tribal Business and Licensing requirements.

Select Yes or No or Not Applicable

**(1100) No Terrestrial Backhaul Reporting
Data Collection Form**

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	290553
<015>	Study Area Name	BEN LOMAND RURAL
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Lisa Cope
<035>	Contact Telephone Number - Number of person identified in data line <030>	9316684131 ext. 2001
<039>	Contact Email Address - Email Address of person identified in data line <030>	lkcb@biomand.net

<1120> Please confirm whether terrestrial backhaul options exist within the supported area pursuant to § 54.313(g) (Yes, No).

<1130> Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(g).

(1200) Terms and Condition for Lifeline Customers		FCC Form 481
Lifeline		OMB Control No. 3060-0986/OMB Control No. 3060-0819
Data Collection Form		July 2013

<010>	Study Area Code	290553
<015>	Study Area Name	BEN LOMAND RURAL
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Lisa Cope
<035>	Contact Telephone Number - Number of person identified in data line <030>	9316684131 ext.2001
<039>	Contact Email Address - Email Address of person identified in data line <030>	lfc@blomand.net

<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	<div>290553TN1210.pdf</div>	Name of Attached Document
<1220>	Link to Public Website	HTTP	

"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	<input checked="" type="checkbox"/>
<1222>	Details on the number of minutes provided as part of the plan,	<input checked="" type="checkbox"/>
<1223>	Additional charges for toll calls, and rates for each such plan.	<input checked="" type="checkbox"/>

(2000) Price Cap Carrier Additional Documentation		FCC Form 481	
Data Collection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819	
<i>Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers</i>		July 2013	

<010>	Study Area Code	230553
<015>	Study Area Name	BEN LOWARD RURAL
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Lisa Cope
<035>	Contact Telephone Number - Number of person identified in data line <030>	5516661131 ext. 2001
<039>	Contact Email Address - Email Address of person identified in data line <030>	lkc@dlomand.net

Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of Incremental Connect America Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e). The information reported on this form and in the documents attached below is accurate.

Incremental Connect America Phase I reporting

<2010>	2nd Year Certification {47 CFR § 54.313(b)(1)}	
<2011a>	3rd Year Certification {47 CFR § 54.313(b)(1)ii}	
<2011b>	Attachment {47 CFR § 54.313(b)(1)ii}	

Price Cap Carrier Receiving Frozen Support Certification {47 CFR § 54.312(a)}

<2012>	2013 Frozen Support Calculation {47 CFR § 54.313(c)(1)}	
<2013>	2014 Frozen Support Calculation {47 CFR § 54.313(c)(2)}	
<2014>	2015 Frozen Support Calculation {47 CFR § 54.313(c)(3)}	
<2015>	2016 and future Frozen Support Calculation {47 CFR § 54.313(c)(4)}	

Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}

<2016>	Certification Support Used to Build Broadband	
--------	---	--

Connect America Phase II Reporting {47 CFR § 54.313(e)}

<2017>	3rd year Broadband Service Certification	
<2018>	5th year Broadband Service Certification	
<2019>	Interim Progress Certification	
<2020>	Please check the box to confirm that the attached document(s), on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.	
<2021>	Interim Progress Community Anchor Institutions	

Name of Attached Document(s) Listing Required Information

(3000) Rate Of Return Carrier Additional Documentation

Data Collection Form

REDACTED FOR PUBLIC INSPECTION

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	290553
<015>	Study Area Name	BEN LOWAND RURAL
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Lisa Cope
<035>	Contact Telephone Number - Number of person identified in data line <030>	9316684131 ext.2001
<039>	Contact Email Address - Email Address of person identified in data line <030>	lkc@blowand.net

CHECK the boxes below to note compliance on its five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CFR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3010)

Progress Report on 5 Year Plan

Milestone Certification (47 CFR § 54.313(f)(1)(ii))

290553TN3010.pdf

Name of Attached Document Listing Required Information

(3011)

Please check this box to confirm that the attached document(s), on line 3012 contains the required information pursuant to § 54.313 (f)(1)(ii), the carrier shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.

☒

(3012)

Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))

290553TN3012.pdf

Name of Attached Document Listing Required Information

(3013)

Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2))

(3014)

If yes, does your company file the RUS annual report

☒

☒

(Yes/No)

(Yes/No)

Please check these boxes to confirm that the attached document(s), on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:

(3015)

Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)

☒

(3016)

Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

☒

(3017)

If the response is yes on line 3014, attach your company's RUS annual report and all required documentation

290553TN3017.pdf

Name of Attached Document Listing Required Information

(3018)

If the response is no on line 3014, Is your company audited?

☒

(Yes/No)

If the response is yes on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains

(3019)

Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications

☐

(3020)

Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

☐

(3021)

Management letter and audit opinion issued by the independent certified public accountant that performed the company's financial audit

☐

If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:

(3022)

Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers,

☐

(3023)

Underlying information subjected to a review by an independent certified public accountant

☐

(3024)

Underlying information subjected to an officer certification.

☐

(3025)

Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

☐

(3026)

Attach the worksheet listing required information

Name of Attached Document Listing Required Information

<010>	Study Area Code	290553
<015>	Study Area Name	BEN LOWAND RURAL
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Lisa Cope
<035>	Contact Telephone Number - Number of person identified in data line <030>	9316684131 ext. 2001
<039>	Contact Email Address - Email Address of person identified in data line <030>	lkc@blowand.net

Financial Data Summary	
(3027) Revenue	
(3028) Operating Expenses	
(3029) Net Income	
(3030) Telephone Plant In Service(TPIS)	
(3031) Total Assets	
(3032) Total Debt	
(3033) Total Equity	
(3034) Dividends	

Certification - Reporting Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
---	--

<010>	Study Area Code	290553
<015>	Study Area Name	BEN LOMAND RURAL
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Lisa Cope
<035>	Contact Telephone Number - Number of person identified in data line <030>	9316684131 ext.2001
<039>	Contact Email Address - Email Address of person identified in data line <030>	lkc@blomand.net

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients	
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.	
Name of Reporting Carrier: BEN LOMAND RURAL	
Signature of Authorized Officer: CERTIFIED ONLINE	Date 06/30/2015
Printed name of Authorized Officer: Lisa Cope	
Title or position of Authorized Officer: Controller	
Telephone number of Authorized Officer: 9316684131 ext.2001	
Study Area Code of Reporting Carrier: 290553	Filing Due Date for this form: 07/01/2015
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Certification - Agent / Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
---	--

<010> Study Area Code	290553
<015> Study Area Name	BEN LOMAND RURAL
<020> Program Year	2016
<030> Contact Name - Person USAC should contact regarding this data	Lisa Cope
<035> Contact Telephone Number - Number of person identified in data line <030>	9316684131 ext.2001
<039> Contact Email Address - Email Address of person identified in data line <030>	lkc@blomand.net

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I certify that (Name of Agent) _____ is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date:
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier:	
Name of Authorized Agent or Employee of Agent:	
Signature of Authorized Agent or Employee of Agent:	Date: 06/30/2015
Printed name of Authorized Agent or Employee of Agent:	
Title or position of Authorized Agent or Employee of Agent:	
Telephone number of Authorized Agent or Employee of Agent:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Attachments

REDACTED – FOR PUBLIC INSPECTION

ATTACHMENT - LINE 112

**Five-Year Network Improvement Plan and
Progress Report**

ATTACHMENT REDACTED IN ENTIRETY

Ben Lomand Rural Telephone Cooperative, Inc.

Line 510

Ben Lomand Rural Telephone Cooperative, Inc.’s demonstration of complying with applicable service quality standards and consumer protection rules for voice and broadband services:

In establishing this certification in its *2005 ETC Order*,¹ the FCC found that an ETC must make “a specific commitment to objective measures to protect consumers.”² The Commission found that for wireless ETCs, compliance with CTIA’s Consumer Code for Wireless Service would satisfy this requirement and that the sufficiency of other commitments would be considered on a case-by-case basis.³ In this context, the FCC stated, “to the extent a wireline or wireless ETC applicant is subject to consumer protection obligations under state law, compliance with such laws may meet our requirement.”⁴

As a Cooperative, and in accordance with Tennessee Code Annotated, Title 65 Public Utilities and Carriers, Chapter 29 Telephone Cooperatives, Ben Lomand Rural Telephone Cooperative, Inc. (“Ben Lomand”) is not governed by the rules of the Tennessee Regulatory Authority (“TRA”) for service quality standards and consumer protection rules. However, Ben Lomand, in the interest of protecting its own customers, has incorporated consumer protection rules comparable to those required of incumbent LECs in the State of Tennessee, allowing Ben Lomand to meet or exceed existing TRA rules. These procedures include, but are not limited to,

¹ *Federal-State Joint Board on Universal Service*, CC Docket No. 96-45, Report and Order, FCC 05-46 (rel. Mar. 17, 2005) (“*2005 ETC Order*”).

² *Id.* at para. 28.

³ *Id.* The FCC noted that under the CTIA Consumer Code, wireless carriers agree to: “(1) disclose rates and terms of service to customers; (2) make available maps showing where service is generally available; (3) provide contract terms to customer and confirm changes in service; (4) allow a trial period for new service; (5) provide specific disclosures in advertising; (6) separately identify carrier charges from taxes on billing statements; (7) provide customers the right to terminate service for changes to contract terms; (8) provide ready access to customer service; (9) promptly respond to consumer inquiries and complaints received from government agencies; and (10) abide by policies for protection of consumer privacy. *Id.* at n. 71.

⁴ *Id.* at n. 72.

the following: (1) publishing the rates, terms, and conditions of service; (2) implementation of anti-slamming and consumer protection procedures; (3) modeling bill presentation to reflect the truth-in-billing requirements; and (4) CPNI, Red Flag Rules, and other applicable federal requirements governing the protection of customers' privacy.

Ben Lomand is subject to consumer protection obligations for broadband services under federal law. These obligations include, but are not limited to, the following: public disclosure of accurate information regarding network management practices, performance, and commercial terms of broadband internet access services; as a means of providing sufficient information for consumers to make informed choices regarding use of such services, and for content, application, service and device providers to develop, market, and maintain internet offerings as specified in 47 CFR § 8.3.

Ben Lomand Rural Telephone Cooperative, Inc.

Line 610

Ben Lomand Rural Telephone Cooperative’s demonstration of ability to function in emergency situations for voice and broadband services:

Ben Lomand Rural Telephone Cooperative, Inc. (“Ben Lomand”) hereby certifies that it is able to function in emergency situations as set forth in 47 C.F.R § 54.202(a)(2)¹. Ben Lomand’s network is designed to remain functional in emergency situations without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations as required by Section 54.202(a)(2). Ben Lomand can change call routing translations as needed to reroute traffic around damaged facilities. Changing call routing translations will also allow Ben Lomand to manage traffic spikes throughout its network, as emergency situations require. In addition, Ben Lomand has redundancy for connectivity purposes *via* additional routes and electronic equipment for voice and broadband services.

As a cooperative, Ben Lomand is in accordance with Tennessee Code Annotated, Title 65 Public Utilities and Carriers, Chapter 29 Telephone Cooperatives, Ben Lomand is not governed by the Rules of the Tennessee Regulatory Authority (“TRA”), Chapter 1220-4-2-.23 Emergency Operation. However, in compliance with Federal emergency situation rules, Ben Lomand’s central offices have adequate provisions for emergency power, a condition allowing them to meet or exceed existing TRA rules for emergency operations. Specifically, each central office building is supplied with standby generators and battery back-up that enable the central office to remain operational until power is restored so long as fuel is available, or until system changes are

¹ Section 54.202(a)(2) requires ETCs that are designated by the commission to “demonstrate its ability to remain functional in emergency situations, including a demonstration that it has a reasonable amount of back-up power to ensure functionality without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations.”

made to reroute traffic. Ben Lomand has battery backup at all office locations and in its electronic equipment sites. Length of run time is determined by the equipment serving the area and the number of customers working out of the equipment. Generators are installed at all central office locations. They will continue to run as long as Ben Lomand has access to fuel.

(710) Broadband Price Offerings
Data Collection Form
FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	290553
<015>	Study Area Name	BEN LOWAND RURAL
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Lisa Cope
<035>	Contact Telephone Number - Number of person identified in data line <030>	9316684131 ext. 2001
<039>	Contact Email Address - Email Address of person identified in data line <030>	lkc@blowand.net

[illegible]

(800) Operating Companies
Data Collection Form

<010>	Study Area Code	290553
<015>	Study Area Name	BEN LOMAND RURAL
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Lisa Cope
<035>	Contact Telephone Number - Number of person identified in data line <030>	9316684131 ext. 2001
<039>	Contact Email Address - Email Address of person identified in data line <030>	lkc@blomand.net
<810>	Reporting Carrier	Ben Lomand Rural Telephone Cooperative, Inc.
<811>	Holding Company	Not Applicable
<812>	Operating Company	Ben Lomand Rural Telephone Cooperative, Inc.

[illegible]

Ben Lomand Rural Telephone Cooperative, Inc. (SAC 290553)

Response to Line 1010 – Description of Voice Services Rate Comparability

(47 CFR §54.313(a)(10))

Ben Lomand Rural Telephone Cooperative, Inc. hereby certifies that the pricing of Ben Lomand's voice services plus federal Subscriber Line Charge (SLC) does not exceed the reasonable comparability benchmark as determined by the FCC through their most recent survey. Additionally, Ben Lomand's voice service rate is no more than two standard deviations above the applicable national average urban rate, as specified in the most recent public notice issued by the Wireline Competition Bureau and Wireless Telecommunications Bureau.

Ben Lomand Connect

Application for Link up and Lifeline Assistance

Eligibility for Lifeline Assistance is dependent upon Applicant's participation in one of more of the programs listed below:

1. I hereby certify that I participate in the following program(s) and have attached proof of one of the benefits that I presently receive in my name. *Please check the applicable program(s).*

☐ Food Stamps

☐ LIHEAP (Low Income Home Energy Assistance Program)

☐ Medicaid (not TennCare)

☐ SSI (Supplemental Security Income)

☐ National School Lunch (Free Lunch Only)

☐ TANF (Temporary Assistance for Needy Families)

2. I also certify that:

- My phone service is listed in my name;
- I am not listed as a dependent on another person's tax return, unless I am more than 60 years old;
- The address listed is my primary residence, and is not a second home or business; and
- If I cease to participate in any of the programs listed in Section 1 of this Application, or if any of the conditions listed in this Section 2 change,
- I will promptly notify the Company that I am no longer eligible for Lifeline Assistance.

3. I authorize the Company to access any records necessary to verify these statements and to confirm my continued participation in the programs listed above. I authorize representatives of the above programs to discuss with and/or provide copies of my records to the Company, if requested by the Company, to verify my participation in the programs listed above, and my eligibility for Lifeline Assistance.

4. I wish to subscribe to: Lifeline Assistance _____ Link Up _____.

5. Normal policy for establishment of service and service deposit apply.

6. I (we) affix, under penalty of perjury, that the foregoing representations are true.

7. Are you currently receiving Lifeline benefits from another phone company? (Landline or Cellular)

Yes _____ No _____ Name of Company _____

APPLICANT'S NAME: _____

APPLICANT'S ADDRESS: _____

TELEPHONE NUMBER: _____ MEMBERSHIP# _____

APPLICANT'S SIGNATURE: _____

BEN LOMAND CONNECT REPRESENTATIVE: _____ DATE: _____

Authorized by agency representative

Name & Title: _____

DATE: _____



Telephone: 931-668-4131
311 N Chancery St P O Box 670

Website: www.blomand.net
McMinnville, TN 37111-0670

November 1, 2014

Attn: Current Lifeline Assistance Participant

Our records indicate you currently receive the "Lifeline Assistance" credit on your Ben Lomand Connect monthly telephone bill.

The Tennessee Regulatory Authority (TRA) requires that all recipients of "Lifeline Assistance" re-qualify twice a year. To re-qualify, you must furnish us with proof of your eligibility by presenting one of the following dated within the past two weeks:

1. **Food Stamps** A current printout from Department of Human Services stating you are on the program.
2. **LIHEAP** Low Income Home Energy Assistance. Proper documentation showing you currently qualify for this assistance from your electric company
3. **Medicaid** A current printout from Department of Human Services stating you participate in the program.
4. **NSL** National School Lunch Program. Printout from school stating your child or children participate in program.
5. **SSI** Supplementary Security Income. A letter from the Social Security Administration stating that you are a current SSI fund recipient.
6. **TANF** Temporary Assistance for Needy Families. Proper documentation showing you currently qualify for this assistance from Department of Human Services.

In order to continue receiving the "Lifeline Assistance" credit, *we must receive your proof of eligibility by November 1, 2014.* If proof of eligibility is not received by this date, the credit will be removed from the **December 1, 2014** bill.

If you do not qualify for "Lifeline Assistance" under any of the six guidelines listed above, you may qualify by your income. To find out if you qualify, call the TRA @ 1-800-342-8359 ext 158.

Please fill out the short form enclosed and mail it along with your proof of eligibility to:

Ben Lomand Connect
311 N Chancery St
McMinnville, TN 37110

To re-qualify in person, please stop by our office between the hours of 8:00 to 5:00 pm on Monday thru Friday. Our office locations are:

311 N Chancery St
McMinnville, TN 37110
Ph 931-668-4131

or

502 Ben Lomand Dr
Sparta, TN 38583
Ph 931-738-2201

or

43 Main St
Tracy City, TN 37387
Ph 931-592-2121

If you have questions, feel free to call our office.

Sincerely,
Avalyn Lacy

I presently receive the following benefits in my name. My telephone service is also in my name.

To insure your privacy, all proof of benefit documentation will be shredded.

_____	Food Stamps	
_____	LIHEP	Low Income Home Energy Assistance
_____	Medicaid	as provided under TennCare
_____	NSL	National School Lunch Program
_____	SSI	Supplemental Security Income
_____	TANF	Temporary Assistance for Needy Families

To qualify by low income, call the TRA@ 1-800-342-8359 ext 158 for more information.

Are you currently receiving lifeline benefits from another phone company? (landline or cellular)

Yes _____ No _____ Name of Company _____

I would like to apply for Lifeline Assistance for my telephone number at address:

 Area Code _____
 **Telephone number _____
 **Date of Birth _____
 **Social Security # _____

Print Name _____

Signature _____



Benefits verified by _____

Ben Lomand Connect Rep.

Date

****Required fields**



Do you need help

paying for
**Telephone
Service?**



You are
eligible to enroll
in the Lifeline program
if you participate in
one of the following:

Tennessee criteria:

- Food Stamps
- Medicaid
- Supplemental Security Income (SSI)
- Temporary Assistance for Needy Families (TANF)
- Low Income Home Energy Assistance Program (LIHEAP)
- Free Lunch Program

OR live in Section 8 federal housing.

(Section 8 only. HUD and other federal programs may not automatically qualify).

What is the Lifeline Program?

Established by the FCC to ensure that telephone service is available and affordable for low income telephone subscribers. Administered by the TN Regulatory Authority, the Lifeline program reduces the monthly local service portion of your telephone bill.

Lifeline does not assist with the long distance portion of your bill or with special features such as Caller ID or Call Waiting.



Two Ways to Apply for Lifeline:

If you receive one of any of the available public assistance programs (see list on front), call Ben Lomand Connect to provide you with an application.

OR

If you "DO NOT" receive public assistance, you may qualify if your total household gross monthly income is equal or less than the amounts found in the Gross Monthly Income table on the TRA website at www.tn.gov/tra/consumerfiles/teleassist.shtml

**Tennessee Regulatory Authority
Consumer Services Division
460 James Robertson Parkway
Nashville, TN 37243-0505
1-800-342-8359 (voice)
1-888-276-0677 (TTY)
615-741-8953 (fax)**



800.974.7779 • www.blomand.net



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Local Service & Pricing

[SERVICES FOR CITY OF MANCHESTER, MCMINNVILLE AND SPARTA CUSTOMERS](#)

Residential Installation Charge \$20.00 (one time)
Premise Visit: \$35.00 (one time)
Service Connection Charge:

Residential Coop Membership Fee: \$10.00 (one time)

[Capital Credit Information](#)

Residential Basic Phone Line: \$14.00 (monthly)

[Explanation of Your Telephone Bill](#)

Inside Wire Maintenance (optional): \$2.00 (monthly)

[Explanation of Inside Wire Maintenance](#)

[Learn More →](#)

Access Recovery Charge
Ben Lomand Connect customers
will see the Access Recovery
Charge added to their phone bill.

[Learn more . . .](#)

Do you need help paying your
telephone service?
Click on the link below to learn if
you are eligible to enroll in the
Lifeline program.

[Learn more . . .](#)

[Support & Service](#)

Customer service and tech
support for Internet, Phone and
TV service.

[Online Billing](#)

Go paperless - view and pay
your bill online.

[Ben Lomand Connect Stores](#)

Pay your bill, learn about our
services, get questions
answered and more.

[Online Yellow Pages](#)

Local search made simple –
find local businesses Phone
numbers and addresses online.



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CURRENT WEATHER CONDITIONS:

CROSSVILLE, CROSSVILLE MEMORIAL-
WHITSON FIELD AIRPORT, TN
LAST UPDATED ON JUN 26 2015, 7:53 PM CDT



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Long Distance Plans & Pricing

[INTERNATIONAL ACCESS
NUMBERS](#)

[SERVICES FOR CITY OF MANCHESTER, MCMINNVILLE AND SPARTA CUSTOMERS](#)

Unlimited Long Distance Plan **\$39.95 per month**

- Talk as long as you want, whenever you want in the United States
- Direct dial – anywhere in domestic USA
- Local, one-touch customer care
- One-bill convenience

1200 Nationwide Plan **\$39.95 per month**

- 1200 minutes per month – anywhere within the United States
- Additional minutes over plan: 10cents per minute

600 Nationwide plan **\$21.95 per month**

- 600 minutes per month – anywhere within the United States
- Additional minutes over plan: 10cents per minute

7 Cent Plan **\$5.95 per month**

- Direct Dial – 7cents per minute anytime, anywhere within the United States

10 Cent In / Out Plan **No monthly fee**

- Direct Dial – 10cents per minute anytime, anywhere within the United States

Community Calling Plan **Included / No monthly fee**

- Automatically save 50% on all direct dial, long distance calls made within the BLTC serving area.
- Calls must be made over Ben Lomand Connect's network. (3rd party calls, collect calls, calling card calls, operator assisted calls, and pay station calls are excluded.)
- No need to call to sign up – if you are our customer, you automatically have the plan!

Boro Plan **\$5.00 per month**

- The "Boro Plan" is a calling plan provided to the Beech Grove service subscribers for unlimited calling TO Murfreesboro.
- Murfreesboro Exchanges: 217, 494, 848, 849, 867, 890, 893, 895, 896, 898, 904, 907
- All you need to do is dial the 7 digit number.

- If you are a Beech Grove customer that needs to call Murfreesboro on a regular basis, this could save you lots of money
- The "Boro" Plan applies to calls billed by Ben Lomand Connect only.

Choo Choo Plan

\$5.00 per month

- The "Choo Choo Plan" is a calling plan provided to Marion County subscribers for calling TO Chattanooga.
- 500 minutes of calling to the following Chattanooga exchanges:
208, 209, 227, 240, 242, 265, 266, 267, 269, 280, 304, 309, 315, 326, 344, 387, 395, 413, 480, 485, 488, 490, 493, 495, 499, 510, 513, 514, 517, 527, 550, 605, 616, 618, 622, 624, 629, 634, 642, 645, 667, 697, 698, 710, 718, 751, 752, 755, 756, 757, 763, 778, 785, 802, 814, 819, 821, 822, 825, 827, 842, 843, 846, 847, 855, 867, 870, 874, 875, 876, 877, 886, 892, 893, 894, 899, 902, 903, 937, 954, 987, 991
- All you need to do is dial 1+ area code + the seven digit telephone number.
- The "Choo Choo" Plan applies to calls billed by Ben Lomand Connect only.

Sewanee Plan

\$3.00 per month

- The "Sewanee Plan" is for calling TO Sewanee only.
- Available for customers in the 592, 779, and 924 exchanges unlimited calling to the following Sewanee exchanges:
598, 768
- All you need to do is dial the seven digit telephone number.
- The "Sewanee Plan" applies to calls billed by Ben Lomand Connect only.

Calling Card Information

- \$0.15 per minute anytime, anywhere in the U.S.
- \$0.55 per call surcharge
- \$0.55 per call pay phone surcharge

Toll Free Service

- \$3.00 per month (residential)
- \$5.00 per month (business)
- \$0.15 per minute anytime, anywhere in the U.S. *Toll free installation fees: \$10.00 (residential) and \$20.00 (business); \$0.55 per call pay phone surcharge applies. Current Universal Service Fund charges of the total interstate long distance charges will apply. Interstate toll, calling card & interstate toll free usage will be assessed the current Universal Service Fund Charge. All BLC calling plans are bill one month in advance.*

International Access Numbers

Support & Service

Customer service and tech support for Internet, Phone and TV service.

Online Billing

Go paperless - view and pay your bill online.

Ben Lomand Connect Stores

Pay your bill, learn about our services, get questions answered and more.

Online Yellow Pages

Local search made simple - find local businesses Phone numbers and addresses online.

[Store Locator](#) [Terms & Conditions](#) [Privacy Policy](#) [Acceptable Use Policy](#) [DMCA Policy](#) [Tariffs](#) [Internet/Network Practices](#) [Contact Us](#) [The Connection](#)

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CURRENT WEATHER CONDITIONS:

**CROSSVILLE, CROSSVILLE MEMORIAL-
WHITSON FIELD AIRPORT, TN**

LAST UPDATED ON JUN 26 2015, 5:53 PM CDT

WEATHER BY [NOAA](#)



**CURRENT CONDITIONS:
THUNDERSTORM HEAVY
RAIN**

TEMP: 74°F

DEWPOINT: 66.9°F **WIND:** NORTH AT 13MPH

HUMIDITY: 79%

YOUR 5-DAY FORECAST AT A
GLANCE

Ben Lomand Rural Telephone Cooperative, Inc. (SAC 290553)

Response to Line 3010 – Milestone Certification (47 CFR §54.313(f)(1)(i))

Ben Lomand Rural Telephone Cooperative, Inc. hereby certifies that throughout 2014, it took reasonable steps to provide upon reasonable request broadband service at actual speeds of at least 4 Mbps downstream/1 Mbps upstream, and currently, it is taking reasonable steps to provide upon reasonable request actual speeds of at least 10 Mbps downstream/1 Mbps upstream broadband service at with latency suitable for real-time applications, including Voice over Internet Protocol, and usage capacity that is reasonably comparable to comparable offerings in urban areas as determined in an annual survey, and that requests for such service are met within a reasonable amount of time.

Ben Lomand Rural Telephone Cooperative, Inc. (SAC 290553)

Response to Line 3012 - List of Community Anchor Institutions to Which the ETC Newly Began Providing Service or Passed

The FCC's *USF/ICC Transformation Order* requires a listing of community anchor institutions to which the ETC newly began providing broadband service. Ben Lomand hereby provides the FCC with a list of community anchor institutions to which it now passes or newly began providing access to broadband service in calendar year 2014.¹

Number	Name	Address
931-692-2457	ALTAMONT PUBLIC LIBRARY	1433 MAIN ST ALTAMONT, TN 37301
931-761-3647	BON AIR MTN HISTORICAL SOCIETY	5600 GUM SPRINGS MOUNTAIN RD SPARTA, TN 38583
931-935-2359	BON DECROFT ELEMENTARY	8095 CROSSVILLE HWY SPARTA, TN 38583
931-761-2476	CASSVILLE COMMUNITY CENTE	227 CASSVILLE LN SPARTA, TN 38583
931-761-9013	CASSVILLE ELEMENTARY SCHOOL	261 WILL THOMPSON RD SPARTA, TN 38583
931-761-2276	CASSVILLE SCHOOL	261 WILL THOMPSON RD SPARTA, TN 38583
931-686-1401	CEDAR GROVE FIRE HALL	132 CEDAR GROVE RD ROCK ISLAND, TN 38581
931-939-5001	CENTERTOWN CHRISTIAN ACADEMY	252 LINE ST MCMINNVILLE, TN 37110
931-761-9014	CENTRAL VIEW ELEMENTARY	14484 OLD KENTUCKY RD WALLING, TN 38583
931-761-2906	CENTRAL VIEW SCHOOL	14484 OLD KENTUCKY RD WALLING, TN 38583
931-761-7222	CENTRAL VIEW VOL FIRE DEP	14462 OLD KENTUCKY RD WALLING, TN 38587
931-738-8511	CHERRY CREEK COMMUNITY CE	298 FRANK SIMS RD SPARTA, TN 38583
931-738-9236	CNO OFFICE	413 SEWELL DR SPARTA, TN 38583
931-692-8181	COMBINED PUBLIC COMMUNICATIONS	62 SPRING ST ALTAMONT, TN 37301
931-738-2114	CUMBERLAND FAMILY CARE PC	457 VISTA DR SPARTA, TN 38583

¹ The FCC has defined community anchor institutions in Section 54.5 of its Rules as "schools, libraries, health care providers, community colleges, other institutions of higher education, and other community support organizations and entities."

REDACTED FOR PUBLIC INSPECTION

931-739-3550	DAVITA SPARTA DIALYSIS CENTER	150 SAM WALTON DR SPARTA, TN 38583
931-761-5588	DEKALB CO LANDFILL	455 FELTS RD JOHNSON CHAPEL, TN 37166
931-935-8200	EASTLAND VOLUNTEER FIRE D	5470 EASTLAND RD SPARTA, TN 38583
931-924-2120	EKO INTERNAL MEDICINE	25 SPRING ST MONTEAGLE, TN 37375
931-738-9013	FINDLAY ELEMENTARY	576 HALE ST SPARTA, TN 38583
931-738-2412	FINDLAY SCHOOL	576 HALE ST SPARTA, TN 38583
931-692-5426	GCHS BASEBALL FIELD HOUSE	25236 SR 108 COALMONT, TN 37301
931-939-4762	GENERATIONS ESTATES AT	6671 NASHVILLE HWY MCMINNVILLE, TN 37111
931-939-5045	GENERATIONS/GAITHER'S GROUP HO	3100 CRISP SPRINGS RD MCMINNVILLE, TN 37111
931-815-1290	GENERATIONS/GAITHERS INC	6068 NASHVILLE HWY MCMINNVILLE, TN 37111
931-592-3631	GRUNDY COUNTY FOOD BANK	861 MAIN ST TRACY CITY, TN 37387
931-592-2923	GRUNDY SAFE COMMUNITIES COALIT	1444 SR 56 TRACY CITY, TN 37301
931-668-4184	HICKORY CREEK DENTAL ARTS	2681 S CHANCERY ST MCMINNVILLE, TN 37110
931-738-8298	HICKORY VALLEY VOL FIRE D	5250 HICKORY VALLEY RD SPARTA, TN 38583
931-657-5012	HY-LAKE CHRISTIAN CAMP	462 HY LAKE LN QUEBEC, TN 37027
931-815-8500	ISHA CARE CLINIC INC	194 TIN HOUSE RD MCMINNVILLE, TN 37110
931-738-9333	JOHN R THOMPSON MD	423 SEWELL DR SPARTA, TN 38583
931-668-5437	KIDS OF THE COMMUNITY	681 CADILLAC LN MCMINNVILLE, TN 37111
931-739-2723	KINDRED HEALTHCARE	43 WHISPERING PINES DR SPARTA, TN 38583
931-668-2273	KIRBY FAMILY MEDICINE	2413 S CHANCERY ST MCMINNVILLE, TN 37110
931-739-2082	LAB CORP	423 SEWELL DR SPARTA, TN 38583
931-738-3314	LAB CORP INC	457 VISTA DR SPARTA, TN 38583
931-739-1404	LABCORP	411 SEWELL DR SPARTA, TN 38583
931-935-8420	LBJ & C DEVELOPMENT CORP	9020 CROSSVILLE HWY SPARTA, TN 38501
931-738-9404	LIFE CARE CENTER OF SPART	508 MOSE DR SPARTA, TN 38583
931-738-9430	LIFE CARE CENTER OF SPARTA	508 MOSE DR SPARTA, TN 38583
931-592-2868	LITTELL RANDALL A OD	97 SAINT CLAIR ST TRACY CITY, TN 37387
931-815-5003	MIDDLE TENNESSEE RADIOLOG	1559 SPARTA ST MCMINNVILLE, TN 37110
931-924-2708	MONTEAGLE WATER PLANT	124 CHICKORY LN MONTEAGLE, TN 37356
931-635-2363	MORRISON CITY OF	130 W MAPLE ST MORRISON, TN 37357

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931-668-7010	MOTLOW STATE COMMUNITY COLLEGE	225 CADILLAC LN MCMINNVILLE, TN 37352
931-815-5030	NEPHROLOGY ASSOCIATES	1559 SPARTA ST MCMINNVILLE, TN 37205
931-738-2036	NETTN WHITE CO E911	2677 CROSSVILLE HWY SPARTA, TN 38583
931-946-2275	NETTN-TN STATE GOVERNMENT	1150 OLD DUNLAP ST SPENCER, TN 38585
931-761-3657	NORTH END COMMUNITY CENTE	115 S BUNKER HILL RD SPARTA, TN 38583
931-761-7969	NORTHFIELD ELEMENTARY SCH	570 S BUNKER HILL RD SPARTA, TN 38583
931-761-9015	NORTHFIELD ELEMENTARY SCHOOL	570 S BUNKER HILL RD SPARTA, TN 38583
931-738-1526	OSCAR SPIVEY MD	417 SEWELL DR SPARTA, TN 37110
931-738-9515	PACESETTERS INC	455 S YOUNG ST SPARTA, TN 38506
931-946-7099	PINEY FIRE DEPARTMENT	2132 ARCHIE RHINEHART PKY SPENCER, TN 38585
931-668-3823	PRE-PIONEER LEARNING CENTER	351 PIONEER LN MCMINNVILLE, TN 37110
931-738-2437	RASHID AHMAD DR	413 SEWELL DR SPARTA, TN 38585
931-815-1616	REGIONAL REHABILITATION CENTER	6290 MANCHESTER HWY MORRISON, TN 37357
931-738-4891	RICHARDSON MEDICAL	2067 ROBERTS MATTHEWS HWY SPARTA, TN 38583
931-686-3030	ROCKY RIVER VOL FIRE STATION #	6755 ROCKY RIVER RD ROCK ISLAND, TN 38581
931-692-5500	ROCKY TOP MOUNTAIN TOP MEDICAL	1595 MAIN ST ALTAMONT, TN 37301
931-946-7434	SENIOR CENTER OF SPENCER	779 OLD MCMINNVILLE ST SPENCER, TN 38585
931-946-2016	SPENCER ELEMENTARY SCHOOL	311 SPARTA ST SPENCER, TN 38585
931-946-0004	TDOT VANBUREN CO MTCE GARAGE	112 GENERATIONS DR SPENCER, TN 38585
931-738-5169	TENN NATIONAL GUARD	1685 MCMINNVILLE HWY SPARTA, TN 37204
931-815-9473	TENNESSEE EASEL LLC	220 HUTCHINS RD MCMINNVILLE, TN 37110
931-668-6001	TENNESSEE HIGHWAY PATROL	594 VERVILLA RD MCMINNVILLE, TN 37243
931-668-8707	TENNESSEE MENTAL HEALTH	810 BLUFF SPRINGS RD MCMINNVILLE, TN 37216
931-738-2516	TENNESSEE NATIONAL GUARD	1685 MCMINNVILLE HWY SPARTA, TN 37204
931-592-2787	TRACY CITY WATER WORKS	14371 US 41 TRACY CITY, TN 37387
931-946-7273	UCHRA VAN BUREN NUTRITION SITE	779 OLD MCMINNVILLE ST SPENCER, TN 38501
931-946-2616	VAN BUREN CO CONVENIENCE	879 VAN BUREN COUNTY CONVENIE SPENCER, TN 38585
931-946-7106	VAN BUREN CO HEALTH DEPAR	907 OLD MCMINNVILLE ST SPENCER, TN 37243
931-946-7424	VAN BUREN CO HIGHWAY DEPT	432 SULLIVAN RD SPENCER, TN 38585
931-946-7942	VAN BUREN CO JUDGE	445 COLLEGE ST SPENCER, TN 38585

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931-946-2284	VAN BUREN CO SHERIFF OFFICE	17 VETERANS SQ SPENCER, TN 38585
931-946-7378	VAN BUREN COUNTY BOARD OF	38 ANDREW K PARKER RD SPENCER, TN 38585
931-946-2242	VAN BUREN COUNTY BOARD OF EDUC	293 SPARTA ST SPENCER, TN 38585
931-946-2438	VAN BUREN COUNTY HEALTH D	907 OLD MCMINNVILLE ST SPENCER, TN 38585
931-946-2265	VAN BUREN COUNTY HIGH SCH	337 SPARTA ST SPENCER, TN 38585
931-946-2168	VAN BUREN COUNTY HIGH SCHOOL	337 SPARTA ST SPENCER, TN 38585
931-946-2614	VAN BUREN COUNTY SOIL	445 COLLEGE ST SPENCER, TN 38585
931-946-7970	VAN BUREN SENIOR	445 COLLEGE ST SPENCER, TN 38585
931-946-2607	VAN BUREN SENIOR COMPANIO	445 COLLEGE ST SPENCER, TN 38585
931-924-2824	VOLUNTEER BEHAVIORAL HEALING	27 2ND ST MONTEAGLE, TN 37405
931-596-4055	WASTE SERVICES INDUSTRIES	9020 HILLSBORO HWY HILLSBORO, TN 37349
931-668-9322	WEBB HOUSE RETIREMENT CENTER	3877 MANCHESTER HWY MCMINNVILLE, TN 37110
931-738-2674	WHITE CO COMMUNITY HOSPIT	401 SEWELL DR SPARTA, TN 38583
931-738-9204	WHITE CO COMMUNITY HOSPITAL	401 SEWELL DR SPARTA, TN 38583
931-738-3506	WHITE CO SCHOOL FOOD	88 PANTHER DR SPARTA, TN 38583
931-738-3507	WHITE COUNTY MEDICAL ASSOCIATE	413 SEWELL DR SPARTA, TN 38583
931-738-9238	WHITE COUNTY MIDDLE SCHOO	300 TURN TABLE RD SPARTA, TN 38583
931-738-4444	WHITE COUNTY MIDDLE SCHOOL	300 TURN TABLE RD SPARTA, TN 38583
931-738-3505	WOODLAND PARK ELEM SCHOOL	88 PANTHER DR SPARTA, TN 38583
931-738-7344	WOODLAND PARK ELEMENTARY	88 PANTHER DR SPARTA, TN 38583

REDACTED – FOR PUBLIC INSPECTION

ATTACHMENT - LINE 3017

ATTACHMENT REDACTED IN ENTIRETY